



Attorney Docket: M8564/2669P

B/10
8/15/03

CERTIFICATE OF MAIL

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on **August 5, 2003**.

Grace Alicea

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Date: August 5, 2003

Jason C. FAN et al.

Confirmation No.: 7539

Serial No.: 09/519,441

Group Art Unit: 2663

Filed: March 3, 2000

Examiner: George, Keith M.

For: ROUTING SWITCH DETECTING CHANGE IN SESSION IDENTIFIER
BEFORE RECONFIGURING ROUTING TABLE

RECEIVED

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AUG 12 2003

Technology Center 2600

AMENDMENT

Sir:

In response to the Office Action dated July 7, 2003, please amend the above-identified application in the following manner:

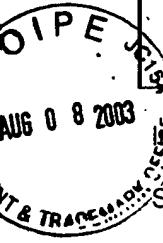
Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

08/11/2003 AADOF01 00000038 09519441

01 FC:2201

42.00 OP



TRANSMITTAL FORM

Attorney Docket No.
M8564/2669P2663
\$AUG 08 2003
Serial No: 09/519,441
Filing Date: March 3, 2000
For: Routing Switch Detecting Change in Session Identifier Before Reconfiguring Routing Table

Group Art Unit: 2663

Examiner: George, Keith M.

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/>	Amendment/Reply	<input type="checkbox"/>	Assignment and Recordation Cover Sheet	<input type="checkbox"/>	After Allowance Communication to Group
<input type="checkbox"/>	<input type="checkbox"/> After Final	<input type="checkbox"/>	Part B-Issue Fee Transmittal	<input type="checkbox"/>	Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/>	Information disclosure statement	<input type="checkbox"/>	Letter to Draftsman	<input type="checkbox"/>	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/>	<input type="checkbox"/> Form 1449	<input type="checkbox"/>	Drawings	<input type="checkbox"/>	Status Letter
<input type="checkbox"/>	<input type="checkbox"/> (X) Copies of References	<input type="checkbox"/>	Petition	<input checked="" type="checkbox"/>	Postcard
<input type="checkbox"/>	Extension of Time Request *	<input type="checkbox"/>	Fee Address Indication Form	<input type="checkbox"/>	Other Enclosures (please identify below):
<input type="checkbox"/>	Express Abandonment	<input type="checkbox"/>	Terminal Disclaimer		AUG 12 2003
<input type="checkbox"/>	Certified Copy of Priority Doc	<input type="checkbox"/>	Power of Attorney and Revocation of Prior Powers		Technology Center 2600
<input type="checkbox"/>	Response to Incomplete Appln	<input type="checkbox"/>	Change of Correspondence Address		
<input type="checkbox"/>	Response to Missing Parts		*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxx month(s), from _____ to _____.		
	<input type="checkbox"/> Executed Declaration by Inventor(s)				

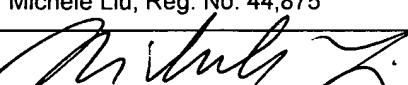
CLAIMS

FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEES
Total Claims	15	21	0	\$9.00	\$ 0.00
Independent Claims	4	3	1	\$42.00	\$42.00
					Total Fees \$42.00

METHOD OF PAYMENT

<input checked="" type="checkbox"/>	Check no. 6312 in the amount of \$42.00 is enclosed for payment of claim fee.
<input type="checkbox"/>	Charge \$ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.
<input checked="" type="checkbox"/>	Charge any additional fees or credit any overpayment to Deposit Account No. 02-2120 (Sawyer Law Group LLP).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Attorney Name	Michele Liu, Reg. No. 44,875
Signature	
Date	August 5, 2003

CERTIFICATE OF MAILING

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Type or printed name	Grace Alicea
Signature	